PART B - FEE(S) TRANSMITTAL

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SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

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APPLICATION N	IO. FILING	FILING DATE FI		RST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/550,086 07/2		7/2006	Alain BEHA		Q90403		9510		
TITLE OF INVENTIO	N: FLUID PRODU	CT DISPENSER							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	ON PREV.	PAID ISSUE FEE	TOTAL FEE DUE	(S) DATE DU	E	
nonprovisional	NO	\$1510.00	\$300.00		\$0.00	\$1,810.00	12/30/2010	0	
EXAMINER			ART UNIT	CLAS	SS-SUBCLASS				
W	3754	2	22-207000						
1. Change of correspon	dence address or indi	cation of "Fee Address	s" (37 CFR 1.363	2. For printing	on the patent front p	age list 1	Sughrue Mion, PLLC	2	
\Box Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.				Rev (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME	AND RESIDENCE	DATA TO BE PRINT	TED ON THE PATE		pe)				
PLEASE NOTE: Unler						entified below, th	e document has been file	ed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
AIRLESSYSTEMS Charleval, France									
Please check the appropriate the propriet of the propriet of the appropriate the propriet of t	priate assignee categ	ory or categories (will	not be printed on th	e patent): 🗆 Inc	lividual ☑ Corporat	ion or other priva	e group entity 🗆 Govern	nment	
4a. The following fee(s) are submitted:			4b. Paymen	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
☑ Issue Fee			☐ A check	☐ A check is enclosed.					
☑ Publication Fee (No small entity discount permitted)			☑ Payment	☑ Payment by credit card. Form 1310-2038 is attached.					
☐ Advance Order - # of Copies				\square The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number $\underline{19\text{-}4880}$.					
		☑ The USPTO is directed and authorized to charge all required fees to Deposit Account No. <u>19-4880</u> . Please also credit any overpayments to said Deposit Account.							
5. Change in Entity Sta	tus (from status indi	cated above)							
☐ a. Applicant claims	SMALL ENTITY st	atus. See 37 CFR 1.27	. 🗆 b. Applic	ant is no longer	claiming SMALL B	ENTITY status. S	ee 37 CFR 1.27(g)(2).		
The Director of the US	PTO is requested to a	apply the Issue Fee and	l Publication Fee (if	any) or to re-ap	ply any previously p	aid issue fee to th	e application identified a	above.	
NOTE: The Issue Fee a party in interest as show					the applicant; a regis	tered attorney or	agent; or the assignee or	: other	
Authorized Signature		Raja Saliba/		Date		Decembe	December 20, 2010		
Typed or Printed Name	e 1	Raja N. Saliba		Registration No. 43,078					